

P21000048817 1/4

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H21000204683 3)))



H21000204683ABC-

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.  
Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : AVA FINANCIAL CONSULTANTS INC  
Account Number : I20170000094  
Phone : (954)842-1979  
Fax Number : (954)905-4315

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: AKRAM.AFSAM@GMAIL.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION  
AJ JENSEN MOBIL INC**

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$87.50

## COVER LETTER

H210002046833

2/4

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** AJ JENSEN MOBIL INC  
**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy  
 \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** MOHAMMED ZABED H. KHAN  
Name (Printed or typed)  
7049 OKEECHOBEE RD  
Address  
FT PIERCE, FL 34945  
City, State & Zip  
772-924-6474  
Daytime Telephone number  
akram.afsam@gmail.com  
E-mail address: (to be used for future annual report notification)

2/11 MAY 21 2010:08

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**

H210002046833

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**The name of the corporation shall be: AJ JENSEN MOBIL INC

3/4

**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

2688 NE DIXIE HWY

7049 OKEECHOBEE BLVD

JENSEN BEACH, FL 34957

FT PIERCE, FL 34945

**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY & ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 1,000 SHARES AT \$1.00 PAR VALUE

FIRST NAME: MOHAMMED ZABED

MIDDLE NAME: H

LAST NAME: KHAN

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: MOHAMMED ZABED H. KHAN -PDTName and Title: N/AAddress: 2017 OLEANDER BLVD #AAddress: 

FT PIERCE, FL 34950

2/21/2018

2/21/2018

AM 10:08

Name and Title: Name and Title: Address: Address: Name and Title: Name and Title: Address: Address:

H210002046833

4/4

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MOHAMMED ZABED H. KHAN  
\_\_\_\_\_  
Address: 2017 OLEANDER BLVD #A  
\_\_\_\_\_  
FT PIERCE, FL 34950  
\_\_\_\_\_

2121 MAY 21 AM 10:08

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: MOHAMMED ZABED H. KHAN  
\_\_\_\_\_  
Address: 2017 OLEANDER BLVD #A  
\_\_\_\_\_  
FT PIERCE, FL 34950  
\_\_\_\_\_

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

MZH/Chen

05/21/2021

Required Signature/Registered Agent

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

MZH/Chen

05/21/2021

Required Signature/Incorporator

Date